



Trust Board Meeting
01 October 2015

Title of the paper:	Risk Management Update including Corporate Risk Register	
Agenda Item:	19/30	
Lead :	Helen Brown, Director of Strategy and Corporate Services	
Author:	Howard Scott, Deputy Head of Risk	
Trust objective:	Tick as appropriate: <input checked="" type="checkbox"/> Achieving continuous improvement in the quality of patient care that we provide and the delivery of service performance across all areas; Setting out our future clinical strategy through clinical leadership in partnership and with whole system working; Creating a clear and credible long term financial strategy.	
Purpose:	The aim of this paper is to update the Committee on the ongoing development and improvement related to Risk Management within the Trust.	
Please add where the paper has previously been discussed		
Name:	Risk Review Group	Integrated Risk and Governance Committee
Date:	22 September 2015	29 September 2015
Benefits to patients and patient safety implications A robust risk management framework directly supports effective patient care and improvements in patient safety.		
Risk implications for the Trust In not having an effective risk management system the Trust risks not meeting its regulatory requirements and weakens its ability to prioritise areas for management action. This update report presents the Committee with an overview of developments in risk management within the Trust together with the key corporate risks scoring 15 or above (27 Risks in total)		Mitigating actions (controls) Marked increase in organisational focus on Risk Management which is supported with improvements in organisational understanding and the quality of Risk Registers including the Corporate Risk register.
Links to Board Assurance Framework, CQC outcomes, statutory requirements Major element in supporting BAF, CQC and Regulatory compliance.		
Legal implications (if applicable) The Trust is required by NHS England to have effective an effective Risk Management Framework in place.		
Financial implications (if applicable) None		
Recommendations (delete as appropriate) The Board is asked to note the progress made and further work underway to continue to strengthen the identification and management of organisational risks.		

Trust Board meeting – 01 October 2015

Risk Management Update including Corporate Risk Register

Presented by: Helen Brown, Director of Strategy and Corporate Services

Risk Management Update

Following the last meeting of the IGRC work has continued both on a corporate level and with Divisions / Directorates to improve the recording and management of individual risk registers and the Corporate Risk Register (CRR) which contains all risks with a current score of 15 or more.

This work has seen a reduction in overall recorded Trust risks from 454 to 407. The majority of the reduction can be accounted for by risks having been closed following amalgamation with other risks documented elsewhere on another department or directorates risk register ie to reduce duplication and support greater clarity re lead responsibility for controls, assurances and further mitigating actions.

Corporate Risk Register (CRR)

At the August meeting of the IRGC there were **53** risks included on the CRR. As described above further work undertaken over the past month meant that at the RRG meeting on 22 September 2015 the CRR was as described:

Risks on CRR	24
Risks Escalated	4
Risks De-escalated / Closed	29

Risks for Escalation:

Division	Re-scored	Risk	Outcome
Finance	16	Failure to control net income and expenditure	Agreed - further work requested on description and scoring.
Environment	15	Door access system	Agreed – included on CRR
Radiology	16	PACS images storage	Agreed – included on CRR
Human Resources	20	NHSP	Agreed – included on CRR

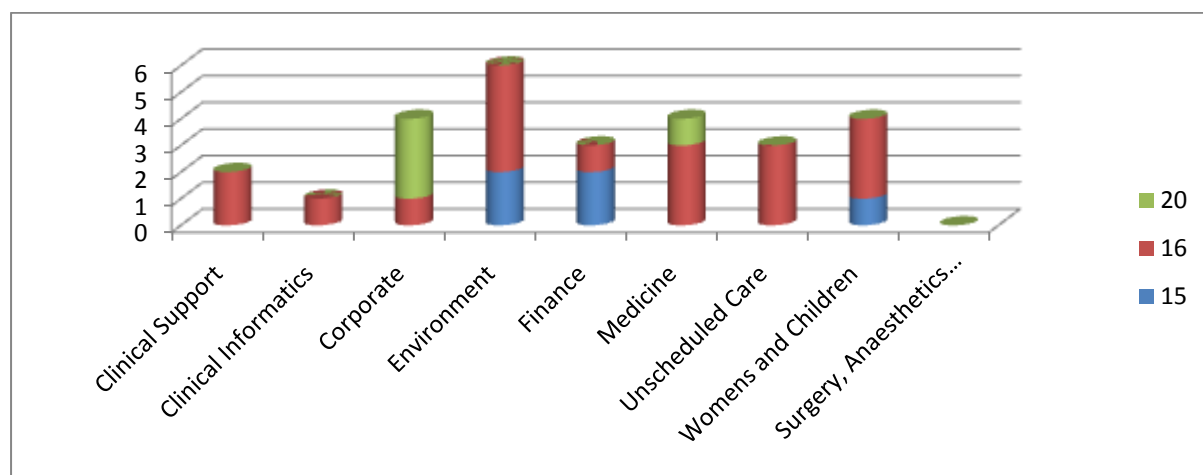
Breakdown of risks De-escalated or Closed:

Division	De-escalated	Closed	Total
WACS	10	12	22
Environment	3		3
Medicine	1	1	2
Communications		1	1
Clinical Support		1	1
Total	14	15	29

A spreadsheet of the individual 29 risks de-escalated / closed and therefore not appearing on the CRR was reviewed in detail at the RRG. The RRG confirmed that all de-escalations or risk closures were appropriate.

Following RRG review the current CRR includes **27** risks.

Corporate Risk by Rating (current) and Division										
Corporate Risks = 7% of all Risks on Datix										
	Clinical Support	Clinical Informatics	Corporate	Environment	Finance	Medicine	Unscheduled Care	Womens and Children	Surgery, Anaesthetics & Cancer	Total
15	0	0	0	2	2	0	0	1	0	5
16	2	1	1	4	1	3	3	3	0	18
20	0	0	3	0	0	1	0	0	0	4
Totals	2	1	4	6	3	4	3	4	0	27



CRR mapped to the 9 Principle Risks - (Principle Risks 2 & 3 account for 19 (70%) of the 27 risks)

Principal Objective	Principal Aim	Principal Risk	CRR (27) Risks Mapped	Description	Executive Leads	Board assurance ?
PO1	1a, 2a, 3	PR1	1	Quality governance and risk management processes insufficiently robust and embedded, compromising ability to provide safe, effective care and health and safety of staff and visitors	HB	SQC
PO1	1a, 2a, 3, 5a	PR2	9	Failure to recruit to full establishments, retain and engage workforce	PDG / TC	WFC
PO1	1b	PR3	10	Current estate and infrastructure compromises ability to deliver safe, responsive and efficient patient care	KH	QSC
PO1	2b	PR4	3	Underdeveloped informatics infrastructure compromises ability to deliver safe, responsive and efficient patient care	LE	F&P
PO1	4	PR5	1	Inability to deliver and maintain performance standards	LH, CL	F&P
PO1	1a,2a,3, 4	PR6	0	Under developed business continuity plans	HB / KH	SQC
PO1, PO3	5b	PR7	3	Failure to achieve financial targets, maintain financial control and realise and sustain benefits from CIP and Efficiency Programmes	DR	F&P
PO1, PO2, PO3	1a,	PR8	0	Failure to sustain key external stakeholder relationships and communications compromises the organisation's strategic position and reputation		
PO2, PO3	5d	PR9	0	Insufficient focus and organisational capacity directed at the development of the long term clinical, financial and estates strategy		

Committee updates

On the same day as the RRG (22/9/15) three Board Committees also met. Each committee received a report on CRR risks related to their areas of responsibility.

Following the meetings of the **Finance and Performance Committee Workforce Committee** and the **Safety and Quality Committee** a number of changes to further strengthen risk management and assurance processes were requested:

- Estates related risks (PR 3) and business continuity and emergency planning (PR 6) risks to be re-mapped from Finance and Performance to Safety and Quality Committee
- Finance risks to be reviewed and updated in the context of the detailed discussion of risks to delivery of the Trust's year-end control total / I&E position. An extraordinary F&P committee is due to be convened in the next 2 weeks to agree priority actions.
- Current risk entry relating to delayed transfers of care to be reviewed to capture Safety and Quality – noted to take lead assurance role for estates risks. Further work is required to more clearly describe / break down into its component parts the identified 'cross cutting' quality governance risk.
- Workforce risks to be reviewed and re-cut as follows:
 - Trust wide – staff engagement / satisfaction; links to retention / turnover ~ (hot spots to be identified).
 - Trust wide – nursing recruitment / vacancy rates ~ (hot spots to be identified)
 - Trust wide – NHS professionals contract performance / low uptake of nurse bank vs reliance on agency staff
 - Neonatal nursing establishment
 - Estates safe system of work to be re-mapped to PR 2 (workforce) from PR3 (estates)

- 'Safe staffing' to be owned by safety and quality committee but with clear linkage across to the workforce committee as required.
- All committees noted that whilst there has been significant progress in how well risks, controls and assurances are documented in the corporate risk register there is not yet full read across from gaps in controls and assurances to 'actions' column and that not all actions described have clear deliverable dates. Further work to address this is required.
- A cross check to the full CQC report is also required to ensure that all risks and issued identified within the CQC reports are assessed / re-assessed and entered onto the risk register as appropriate.
- It was noted that sub-committees will wish to seek further assurance relating to risks relevant to their areas of responsibility currently scored at below 15 on divisional and directorate risk registers and that processes to support this will be put in place for future meetings.

Recommendation

The Board is asked to note the progress made and further work underway to continue to strengthen the identification and management of organisational risks.

Helen Brown
Director of Strategy and Corporate Services
23 September 2015